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APPLICANTS

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** CONTINUING DATA *****
 This application is a CIP of PCT/EP02/10063 09/03/2002

** FOREIGN APPLICATIONS *****
 UNITED KINGDOM 01 21459.2 09/05/2001
 UNITED KINGDOM 02 25245.0 10/30/2002
 UNITED KINGDOM 03 06290.8 03/19/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 03/05/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 49	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 17
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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TITLE
 Diagnostic method for transmissible spongiform encephalopathies

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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